Fill in this information to identify your case:	
Debtor 1 Todd A. Pereira	
Debtor 2 Jacqueline A. Pereira (Spouse, if filing)	
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OF	IIO
Case number 2:13-bk-52088	Check if this is:
(If known)	An amended filing
	A supplement showing post-petition chapter 13 income as of the following date:
Official Form B 6I	MM / DD/ YYYY

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment nformation.		Debtor 1	Debtor 2 or non-filing spouse
f you have more than one job,	Employment status	■ Employed	■ Employed
attach a separate page with nformation about additional	Employment status	☐ Not employed	☐ Not employed
employers.	Occupation	Engineer	Administrative Assistant
nclude part-time, seasonal, or self-employed work.	Employer's name	JPMorgan Chase Bank	Rhodes Building Services
Occupation may include student or homemaker, if it applies.	Employer's address	1111 Polaris Pkwy Columbus, OH 43240	7466 Almendinger Prospect, OH 43342

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

				For Debtor 1		filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	9,004.00	\$	1,350.00
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$ _	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$_	9,004.00	\$_	1,350.00

Official Form B 6I Schedule I: Your Income page 1

Debt Debt		Todd A. Pereira Jacqueline A. Pereira	•	Ca	se number (<i>if known</i>)	2:13	-bk-52088	
				F	or Debtor 1		Debtor 2 or	
	Сор	y line 4 here	4.	\$	9,004.00	nor \$	n-filing spouse 1,350.00	
_	Lict				-		<u> </u>	
5.		all payroll deductions:	Fo	ተ	0.074.00	æ	040.00	
	5a. 5b.	Tax, Medicare, and Social Security deductions	5a. 5b.	\$ \$		\$_ \$	216.00	
	5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5c.	\$	0.00	\$-	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$		\$ -	0.00	
	5e.	Insurance	5e.	\$	0.00	\$-	0.00	
	5f.	Domestic support obligations	5f.	\$		\$	0.00	
	5g.	Union dues	5g.	\$		\$	0.00	
	5h.	Other deductions. Specify: HSA	5h	+ \$	208.00	+ \$ _	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	4,068.00	\$	216.00	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,936.00	\$	1,134.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				_		
	01	monthly net income.	8a.	\$	0.00	\$_	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$_	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		•		•		
	0.1	settlement, and property settlement.	8c.	\$	0.00	\$_	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$_	0.00	
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	8e.	\$	0.00	\$ <u>_</u>	0.00	
		Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	- 8g.	\$		\$ -	0.00	
	8h.	Other monthly income. Specify:	8h	+ \$		+ \$	0.00	
9.	٨٨٨	all other income. Add lines 8a+8b+8c+8d+8e+8f+8q+8h.	- 9.	¢	0.00	\$	0.00	
J.	Auu	an other moone. Add lines our obtour our our or or or office.	٥.	Ψ-	0.00	Ψ-	0.00	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		4,936.00 + \$	1,	134.00 = \$ 6,07	0.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	deper				Schedule J	
	Spe	,				_	4.4	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					12. \$ 6,07	0.00
13.	Do	you expect an increase or decrease within the year after you file this form	?				Combined monthly inco	me
		No.						
		Yes. Explain: Mr. Pereira's income includes his bonus income. his employer.	The	bo	nus is a discreti	onary	y annual bonus froi	m

Fill	in this informa	ation to identify ye	our case:					
Deb	otor 1	Todd A. Per	eira			Chec	ck if this is:	
							An amended filing	
	otor 2	Jacqueline A	A. Pereira	1				ving post-petition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bank	ruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO	<u> </u>	-	MM / DD / YYYY	
	e number 2 nown)	:13-bk-52088					A separate filing fo 2 maintains a sepa	r Debtor 2 because Debtor rate household
 O1	fficial Fo	orm B 6J						
		J: Your	_ Exner	1989				12/1:
Be info nun	as complete ormation. If n mber (if know	and accurate as	s possible eded, atta	. If two married people ar ich another sheet to this	e filing together, be form. On the top of	oth are equ any addition	ally responsible fo onal pages, write y	or supplying correct
Par		ribe Your House	ehold					
1.	Is this a joi							
	□ No. Go to		•	- (- l l. 0				
		es Debtor 2 live	ın a separ	ate nousenoid?				
	■ N		st file a ser	parate Schedule J.				
2								
2.	•	e dependents?	☐ No					
	Do not list Debtor 2.	Debtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	e the						□ No
	dependents				Son		7	■ Yes
								□ No
					Son		12	Yes
								□ No
					Foster Son		14	Yes
								□ No
3.	expenses of	penses include of people other t ad your depende	han $_{\square}$	No Yes				☐ Yes
exp	imate your e	a date after the	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses
4.		or home owners nd any rent for th		ses for your residence. I	nclude first mortgage	e 4. \$	i	1,370.00
	If not inclu	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner'	s, or renter	's insurance		4b. \$		0.00
	•	•	•	ıpkeep expenses		4c. \$		150.00
	4d. Home	eowner's associa	tion or con	dominium dues		4d. \$	·	0.00
5.	Additional	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

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ebtor 1 Tod	ld A. Pereira		
ebtor 2 Jac	queline A. Pereira	Case number (if known)	2:13-bk-52088
Utilities:			
	tricity, heat, natural gas	6a. \$	385.00
	er, sewer, garbage collection	6b. \$	51.10
	phone, cell phone, Internet, satellite, and cable services	6c. \$	309.00
	er. Specify:	6d. \$	0.00
Food and	housekeeping supplies	7. \$	1,150.00
Childcare	and children's education costs	8. \$	300.00
Clothing,	laundry, and dry cleaning	9. \$	300.00
Personal of	care products and services	10. \$	55.00
Medical ar	nd dental expenses	11. \$	325.00
Transport	ation. Include gas, maintenance, bus or train fare.		
•	ude car payments.	12. \$	430.00
Entertainn	nent, clubs, recreation, newspapers, magazines, and books	13. \$	63.00
Charitable	contributions and religious donations	14. \$	0.00
Insurance			
Do not incl	ude insurance deducted from your pay or included in lines 4 or 20.		
15a. Life	insurance	15a. \$	0.00
15b. Hea	Ith insurance	15b. \$	0.00
15c. Vehi	icle insurance	15c. \$	152.00
15d. Othe	er insurance. Specify:	15d. \$	0.00
	not include taxes deducted from your pay or included in lines 4 or 20.		0.00
Specify:	The motion control for pay of motions in motion of the	16. \$	0.00
· · · -	nt or lease payments:		<u> </u>
	payments for Vehicle 1	17a. \$	0.00
	payments for Vehicle 2	17b. \$	0.00
17c. Othe	• •	17c. \$	0.00
17d. Othe		17d. \$	0.00
	nents of alimony, maintenance, and support that you did not report a		0.00
	from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 6I).	1 8. \$	0.00
	ments you make to support others who do not live with you.	\$	0.00
Specify:	monto you make to support others who do not me wan you	19.	0.00
	property expenses not included in lines 4 or 5 of this form or on Sch		
	gages on other property	20a. \$	0.00
	l estate taxes	20b. \$	0.00
	perty, homeowner's, or renter's insurance	20c. \$	0.00
	ntenance, repair, and upkeep expenses	20d. \$	
		· -	0.00
	neowner's association or condominium dues	20e. \$	0.00
Other: Spe	ecify: Extracurricular Activities	21. +\$	200.00
Your mon	thly expenses. Add lines 4 through 21.	22. \$	5,240.10
	is your monthly expenses.		
	your monthly net income.		
	y line 12 (your combined monthly income) from Schedule I.	23a. \$	6,070.00
	y your monthly expenses from line 22 above.	23b\$	5,240.10
	, , · · · · · · · · · · · · · · · ·		5,240.10
23c. Suht	tract your monthly expenses from your monthly income.		7
	result is your monthly net income.	23c. \$	829.90
For example	pect an increase or decrease in your expenses within the year after ye, do you expect to finish paying for your car loan within the year or do you expect you to the terms of your mortgage?		ease or decrease because of a
☐ Yes.			
□ Yes. Explain:			